

STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

COVER PAGE

A Public Document

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
SAUER	ANTHONY	PAUL	(916) 558-5800
MAILING ADDRESS (May use business address)	STREET	CITY	STATE ZIP CODE
721 Capitol Mall	Sacramento	CA	95814
			OPTIONAL: FAX / E-MAIL ADDRESS
			tsauer@dor.ca.gov

1. Office, Agency, or Court

Name of Office, Agency, or Court:

Department of Rehabilitation

Division, Board, District, if applicable:

Director's Office

Your Position:

Director

→ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency:

Position:

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ County of _____

☐ City of _____

☐ Multi-County _____

☐ Other _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial

Date: ____/____/____

☒ Annual: The period covered is January 1, 2007, through December 31, 2007.

-or-

☐ The period covered is ____/____/____, through December 31, 2007.

☐ Leaving Office (Check one)

Date Left: ____/____/____

☐ The period covered is January 1, 2007, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate

4. Schedule Summary

→ Total number of pages including this cover page: 2

→ Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☒ Yes — schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes — schedule attached
Investments (10% or greater Ownership)

Schedule B ☐ Yes — schedule attached
Real Property

Schedule C ☐ Yes — schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☐ Yes — schedule attached
Income — Gifts

Schedule E ☐ Yes — schedule attached
Income — Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

3/17/08
(month, day, year)

Signature

(File the originally signed statement with your filing official.)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Anthony P. Sauer

> NAME OF BUSINESS ENTITY

IBM

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Business/Computer Machines

FAIR MARKET VALUE

☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock

☐ Other

(Describe)

IF APPLICABLE, LIST DATE:

____/____/07
ACQUIRED

____/____/07
DISPOSED

> NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock

☐ Other

(Describe)

IF APPLICABLE, LIST DATE:

____/____/07
ACQUIRED

____/____/07
DISPOSED

> NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

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☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock

☐ Other

(Describe)

IF APPLICABLE, LIST DATE:

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____/____/07
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GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock

☐ Other

(Describe)

IF APPLICABLE, LIST DATE:

____/____/07
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> NAME OF BUSINESS ENTITY

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☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

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☐ Other

(Describe)

IF APPLICABLE, LIST DATE:

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☐ Stock

☐ Other

(Describe)

IF APPLICABLE, LIST DATE:

____/____/07
ACQUIRED

____/____/07
DISPOSED

Comments: